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Bib Data Sheet

CONFIRMATION NO. 5885

SERIAL NUMBER 10/650,114	FILING DATE 08/26/2003 RULE	CLASS 128	GROUP ART UNIT 3743	ATTORNEY DOCKET NO. 2532-00323
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APPLICANTS

Erkki Heinonen, Helsinki, FINLAND;

** CONTINUING DATA *****
more AMUR

** FOREIGN APPLICATIONS *****
more AMUR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 11/17/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FINLAND	SHEETS DRAWING 2	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
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Verified and Acknowledged
 Examiner's Signature: *AMUR* Initials: _____

ADDRESS
 26753
 ANDRUS, SCALES, STARKE & SAWALL, LLP
 100 EAST WISCONSIN AVENUE, SUITE 1100
 MILWAUKEE, WI
 53202

TITLE
 Method for indicating the amount of ventilation inhomogeneity in the lung

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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